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# Group Benefits Administration Guide

Group Benefits underwritten by Wawanesa Life • Issued on May 6, 2009

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Prepared By: John Deacon & Karen McNichol

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# Employee Coverage

Keep Track of Employees Covered by the Group Benefits Plan

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Employee Name	Cert #	Full Time	Date Employed	Benefits Start Date

NOTES:

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# Contact Information

## The Deacon Group

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### IMPORTANT INFORMATION RE: ENROLLMENT & CHANGE FORMS - PLEASE READ

In the last few months we have had some administrators submitting Enrollment Applications, Change Forms and Optional Life forms directly to Wawanesa. **Please do not do this.** We need to review each application prior to it being submitted for any errors or oversights. Please send all enrollment and change forms to our office. In the instances that Wawanesa has received these forms directly, the coverages set up by the insurer have sometimes been different than intended. To prevent this from happening, sending the forms first to us should mean the coverage details are correct. If you have any questions please contact John or Karen.

Please forward all enrollment, change forms and applications to the attention of Karen or John at Deacon Insurance.

### THE DEACON GROUP

6 Adelaide Street East, Suite 420  
Toronto, Ontario  
M5C 1H6  
Telephone: (416) 367-0117  
Fax: (416) 362-2734  
Website: [www.deaconinsurance.ca](http://www.deaconinsurance.ca)

### JOHN DEACON, BROKER

Extension 227  
Email: [john@deaconinsurance.ca](mailto:john@deaconinsurance.ca)

### KAREN MCNICHOL, ADMINISTRATOR

Extension 233  
Email: [karen@deaconinsurance.ca](mailto:karen@deaconinsurance.ca)

### HEALTH, VISION AND DENTAL CLAIMS

Please send all health, dental and vision claim forms and receipts directly to the insurer. Their address is:

Wawanesa Life  
GROUP division  
702-191 Broadway  
Winnipeg, Manitoba R3C 3P1



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# Administration

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## WHO ARE THE ADMINISTRATORS IN YOUR CHURCH?

Any person responsible for administering group benefits in your organization should have a copy of this manual. These people may include administrators, administrative assistants who may take over the role of administrator should the chief administrator be away, Church Treasurers and Senior/Lead Pastors. The more people in your church who have access to the manual, the smoother your plan will run. Please note that the insurer may not honor requests in the case that the proper procedures are not followed.

## THREE MONTH WAITING PERIOD

There is a mandatory three month waiting period with this plan. Please advise new employees of this waiting period. A new employee must be employed for three consecutive months before their coverage takes effect.

## APPLICATION PROCESS

**Every** full-time or part-time employee who works more than 30 hours per week must complete an application within one month of their date of employment even if they have other coverage. This application form **must** then be forwarded to The Deacon Group right away. If they have alternate health, dental and/or vision coverage through a spouse please indicate this on the “Group Benefits Enrollment Form” and they will be covered with Life, AD&D and LTD benefits only.

If the employee fails to fill out the “Group Benefits Enrollment Form” within 31 days of the enrollment date the employee will be considered a late applicant. This may result in limited coverage or an outright refusal of benefits. (Please see the section on Late Applicants)



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## ADDING NEW PLAN MEMBERS

- \* Complete the sections marked D. "Information Supplied by Policyholder" on the Group Benefits Enrollment Form.
- \* Give the employee the Group Benefits Enrollment Form to be completed in ink and returned to you.
- \* Ensure that the form is
  - fully completed and legible
  - signed and dated by the employee
  - contains correct salary information and benefit selection
  - If the employee is waiving health, dental or vision coverage they must fill out Section C "Refusal of Benefits" completing the information regarding spousal insurance.
  - If there is no alternate coverage the employee cannot waive these benefits
- \* You may fax a copy to our office for quicker processing but the original **must** be sent to The Deacon Group attention John or Karen. The original form is required for legal purposes by the insurer.
- \* Keep a copy of the Application form for your files.

\*\*\*Forward the Original Application form to The Deacon Group, Att. Karen or John\*\*\*

## EMPLOYEE CHANGES ( IE. CHANGES IN SALARY)

Increases in insurance apply only if a plan member is "Actively at Work". "Actively at Work" refers to plan members gainfully employed by the churches on a regular basis for a minimum of 30 hours per week. Plan members absent due to vacation, weekends, statutory holidays, or shift variances are still considered actively at work. Changes to employees not "Actively at Work" (ie. those employees absent from work because of an extended illness) will take effect on the day the member returns to work.

It is important to report changes within 31 days of the date of the change. Again the **Original Change Form must** be forwarded to The Deacon Group attention John or Karen. **Do not** send these or any other enrollment form to Wawanesa.

## CHANGES IN EARNINGS

Send revised earnings in writing (by email, fax or letter) to The Deacon Group. Please include

- member's name
- identification number
- revised earnings
- effective date



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## CHANGES IN FAMILY STATUS (SINGLE/FAMILY)

- \* Employees must complete and sign the Group Benefits Notice of Change Form within 31 days of the date of the change. Those changes include: marriages, the birth and/or adoption of a child and marital separation and/or divorce.
- \* Provide the employee with the Group Benefits Notice of Change Form to complete and sign.
- \* Ensure that the form is
  - fully completed and legible
  - signed and dated by the employee
- \* Forward the Original Group Benefits Notice of Change Form to the Deacon Group
- \* You may fax a copy in advance of this for quicker processing of the changes. Again the original form is required for legal purposes by the insurer.
- \* Keep a copy of the form for your records.
- \* Once it becomes available give the employee their new certificates

## CHANGING THE BENEFICIARY

The beneficiary is the one who in the event of the death of the plan member would receive the Life Insurance benefit. In the case of a married plan member the beneficiary is typically the spouse. With a change in marital status the beneficiary typically changes. Life Insurance proceeds paid to the estate are not creditor proof.

In the absence of a living beneficiary on the policy, the proceeds would be payable to the 'Estate' of the plan member.

### Minor Children:

If the beneficiary is a minor child, a trustee designation is recommended. The employee may wish to appoint a trustee by completing the Trustee Appointment Form. In the event an employee dies leaving a minor child(ren) as beneficiary without appointing a Trustee, the proceeds of the life insurance will be paid to the courts in trust for the child(ren).

### For More Information on Naming your Beneficiaries:

For more information on naming your beneficiaries please contact John Deacon or Karen McNichol.



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## LATE APPLICANTS

Should you want to add a plan member when more than 31 days has elapsed after the employee's effective date you should contact John Deacon or Karen McNichol immediately.

In order to submit a late application form you may be required to complete :

- \* A "Group Benefits Enrollment Form"
- \* A Medical Evidence Disclosure
- \* You may be required to submit additional medical evidence at the member's own expense.



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# Electronic Billing, Payment and Online Access

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## ELECTRONIC BILLING

All churches are now asked to provide The Deacon Group with an email address to deliver your monthly billings. Please do this at your earliest opportunity.

## ELECTRONIC PAYMENT OPTIONS

We are hoping to have electronic payment options in place by May or June of 2009. We will advise you of the method closer to the date of launch of this service.

## ONLINE ACCESS

The Deacon Group will soon be launching their new and improved website. Our site will include administration forms, claim forms and instructions regarding form completion. These forms will be downloadable for your convenience.

The web site will also contain a premium calculator similar to the one included in this package so that you may calculate, in advance of receiving your first bill, the cost of an employees benefit package.

Please stay tuned for the announcement that our new site has "gone live".



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